

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(OR USE FORM 170-70-3-5)

10-048,184
APPLICANT

CLAMS	AS FILED						AFTER DELETION OF AMENDMENT						AFTER ADDITION OF AMENDMENT					
	IND.		DEP.		IND.		DEP.		IND.		DEP.		IND.		DEP.		IND.	
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49																		
50																		
TOTAL IND.																		
TOTAL DEP.																		
TOTAL COST																		
	12																	
		X																
	32																	